

REMARKS

Claims 1-15 have been cancelled without prejudice or disclaimer. Claims 16-70 are pending for examination.

A check in the amount of \$1,572.00 is attached in payment of the required fee for excess claims.

The Commissioner is hereby authorized to charge to Deposit Account No. 50-1165 any fees that may be required by this paper and to credit any overpayment to that Account. If any extension of time is required in connection with the filing of this paper and has not been requested separately, such extension is hereby requested.

Respectfully submitted,

NHS:jab

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March 17, 2004

By: Nelson H. Shapiro  
Nelson H. Shapiro  
Reg. No. 17,095